

ONE TIME PAYMENT PROCESS

Adaptive Equipment & Special Medical Needs Purchases

Directive 2.23

Authorizing Code: 62A-5-103

Rule: n/a

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Forms: 295A, 295 CAPS

Purpose

This process outlines one-time purchases for the following services: Environmental Adaptations to the Home or Vehicle (EA1 and EA2), Specialized Medical Needs (SM1 and SM2), and State Funded one-time Purchases (MAG).

Service Codes

- 1. EA1 Environmental Adaptations to the Home
- 2. EA2 Environmental Adaptations to a Vehicle
- 3. SM1 Specialized Medical Needs up to \$5000.00
- 4. SM2 Specialized Medical Needs over \$5000.00
- 5. MAG State Funded One Time Purchases

Contact Information

- 1. AT Specialist: Scott Fields and Nadya Ugarte, ae.dspd@utah.gov
- 2. Program Coordinator: Becky Dalby, DSPD Program Manager, beckydalby@utah.gov
- 3. Service Manager: Darcy Anderson, DSPD Administrative Service Manager, <u>darcyhanderson@utah.gov</u>

Definitions

Support Coordinator: includes contracted External Support Coordinators (SCE), Division of Services for People with Disabilities (DSPD) employed Support Coordinator or Transition Case Worker, and DSPD employed Nurse Coordinators.

Forms

- 1. 295A One-Time Payment Process Pre-Purchase Assessment Form
- 2. 295 CAPS One-Time Payment Form
 - a. Go to the DSPD provider forms page,
 - b. Select Miscellaneous Forms, and
 - c. Download both Forms.

Steps to Complete a One Time Purchase

Step 1: Support Coordinator determines need for all service codes.

- a. The Person has a need for adaptive equipment, special medical needs, or other item(s) to ensure the Person's health and safety, and
- b. The item(s) cannot be funded by the Person, through insurance, or other resources.

Step 2: Support Coordinator completes a Pre-Purchase Assessment for all service codes.

- a. Complete the 295A One-Time Payment Process Pre-Purchase Assessment Form (295A/PPO)
- b. Email the completed 295A/PPO to the AT Specialist
 - i. The AT Specialist reviews, completes, and returns the 295A/PPO to the Support Coordinator. A completed form includes a signature and indication on the bottom of the form that one of the following actions is required: a home assessment, no home assessment, a UCAT vehicle assessment, or no AT Specialist involvement.
- c. Coordinate completion of any needed assessments.
 - i. The AT Specialist completes the home assessment.
 - ii. The AT Specialist and UCAT complete the vehicle assessment.
- d. Upload into USTEPS the completed 295A/PPO, home assessment report, or vehicle assessment (as applicable) using the 'Pre-Purchase Assessment' document type.

The Pre-Purchase Assessment is required documentation for Request for Services (RFS). Assessment includes: form '295A One-time Payment Process Pre-Purchase Assessment' (also referred to as the Pre-Purchase Order (PPO)) and, if applicable, the home assessment report written by the AT Specialist, or vehicle assessment report written by UCAT.

Step 3: Support Coordinator gathers Insurance Denials & Prescriptions for all service codes.

- a. Obtain a Medicaid and/or private insurance denial for each item being requested. Please refer to the end of this document for instructions on how to obtain a Medicaid denial.
 - i. Exceptions for MAG purchases may apply, contact the Program Coordinator with questions.
- b. Obtain a prescription for each item being requested to purchase from the Person's physician or advanced practice registered nurse with prescriptive privileges. Prescriptions are only valid within 1 year of the date on the prescription
 - i. Exceptions for MAG purchases may apply, contact the Program Coordinator with questions.
- c. Scan and upload the insurance denial(s) into USTEPS using the 'Medicaid Insurance Denial' or 'Private Insurance Denial' document type
- d. Scan and upload the prescription(s) into using the 'Prescription' document type

Insurance denials and prescriptions are required documentation for the Request for Services (RFS).

FOR EA1, EA2, SM1, & SM2 PURCHASES PLEASE SKIP TO STEP 5.

Step 4: Support Coordinator documents criteria in USTEPS log note for MAG purchases only.

- a. Why the purchase cannot be made using any other one-time payment codes, including that the purchase:
 - i. is not for an environmental adaptation to the Person's home or vehicle,
 - ii. is not for specialized medical needs, and
 - iii. is not does not meet the criteria STC

b. Alternative sources of funding have been exhausted

A log note showing MAG criteria has been met is required documentation for the Request for Services (RFS).

Step 5: Support Coordinator obtains quotes/bids for all service codes.

- a. Purchases must be made from a vendor with a current State Cooperative Contract if the purchase is for any of the following items: ceiling track lift, portable lift, stair lift, vertical platform lift (VPL), vehicle lift, parts, repairs, or maintenance of a lift, ramps, strollers, bathing, toileting, activities of daily living (ADL) assistive equipment, and other comparable community and environment adaption and accessibility equipment.
- b. Obtain a **separate quote for each item** being requested as outlined below:
 - i. Purchases from vendor with a current State Cooperative Contract:
 - A. If the purchase is \$999.99 or under at least one quote is required
 - B. If the purchase is *over* \$1000.00 at least **two** written comparable quotes are required. The Support Coordinator must keep documentation of contacting multiple vendors to request quotes. Vendors must be given at least two weeks to submit a quote. If two quotes cannot be obtained, the Support Coordinator must include documentation of efforts to obtain the required quotes with the RFS.
 - ii. Purchases from non-contracted vendors:
 - A. If the purchase is \$999.99 or under: at least one quote is required
 - B. If the purchase is *over \$1000.00*: at least **two** written comparable quotes are required.
 - C. If the purchase is *over* \$5000.00, a Purchase Order through State Purchasing at the State Capital is required. The Program Coordinator will assist with getting the Purchase Order after the Request for Services (RFS) has been approved. Notify the Program Coordinator by email of the approved RFS and need for a Purchase Order.

If purchasing goods and services through a non-contracted vendor, and the total cost is \$5000.00 or more, the Program Coordinator will work with State Purchasing to get vendor approval and obtain the required Purchase Order. After State Purchasing awards a vendor, the Program Coordinator will email the vendor and the Support with notification of award.

List of State Cooperative Contractors

- 1. Go to the Utah State Purchasing website:
 - a. Select State Contracts
 - b. Search for "Patient Wheelchair Lifts Ramps Modifications and Accessories"
 - c. Select View Details of the vendor to see contact information
- 2. Request a quote/bid:
 - a. Select Get a Quote, located in the top right of any vendor detail page, to request a quote from all contracted vendors, or
 - b. Contact each vendor directly.

Quotes/Bids are required documentation for the Request for Services (RFS).

Step 6: Support Coordinator submits RFS for all service codes.

- a. Complete and submit RFS through USTEPS.
 - i. Refer to USTEPS help manual for instructions on how to complete an RFS.
 - ii. If additional help is needed, please contact the RFS team member or the USTEPS help line.
- b. Wait for RFS approval before starting Step 7.

Step 7: Support Coordinator notifies the Program Coordinator of RFS approval for all service codes.

- a. Email notification of RFS approval to the Program Coordinator. Subject line of the email should be 'RFS approval for one-time purchase.' Email should include the Person's name and approved items.
- b. The Program Coordinator will email an award notification to the vendor and Support Coordinator.

The Support Coordinator must not contact any vendors to authorize or promise work, until after the Program Coordinator has emailed an award notification to the vendor and the Support Coordinator.

Step 8: Support Coordinator completes 295 CAPS Form for all service codes.

- a. Email the following documentation to Service Manager:
 - i. Completed 295 CAPS Form that includes:
 - A. Numbers 1-16 filled out
 - B. Support Coordinator signature
 - C. Provider signature
 - i. Copy of the State Purchasing Purchase Order, if the purchase is *over \$5000.00* and is not being made using a vendor with a State Cooperative Contract
 - ii. Completed W9 signed with in the last six months, if the provider is not known to CAPS.

CAPS Provider Search

- 1. Open USTEPS,
- 2. Go to CAPS searches,
- 3. Enter the provider name in the search value on the Provider Search screen, and
- 4. Search.

Step 9: Support Coordinator adds Purchase to USTEPS for all service codes.

- a. Program Coordinator notifies the Support Coordinator by email that an approval for the purchase has been created.
- b. Enter the purchase into USTEPS by adding the approval details from the Program Coordinator's email into the Person's PCSP and plan budget.

Step 10: Support Coordinator coordinates Final Vendor Invoice for all service codes.

- a. Coordinate with the vendor and ensure the product has been appropriately delivered.
 - i. Contact the Person/family to ensure the product has been delivered and meets the expectation of the Person/family
 - ii. If there are any issues with the final delivery/installation of the product, the Support Coordinator will contact the vendor to coordinate any additional items that may be needed for satisfactory completion of the project.
- b. Obtain a final invoice from the vendor that will, at a minimum, contain:
 - i. the cost of the work (should match the original quote or final approved quote),
 - ii. the date of purchase was completed,
 - iii. the vendor's name, and

- iv. description of the purchase (should match the original quote or final approved quote).
- c. Email the final invoice to the Program Manager.
- d. Approve the payment through the E520 process.

The Support Coordinator must only approve payments for products/project that have been verified by the Support Coordinator as being completed satisfactory.

Instructions on how to obtain a Medicaid Denial for One Time Purchases for DHS/DSPD

1. Use the <u>Medicaid Coverage and Reimbursement Code Lookup Tool</u> on the Utah Department of Health Medicaid webpage to verify if an item is covered by State Plan Medicaid.

Except for stair lifts, permanent ceiling track lifts, vehicle lifts, ramps, permanent bath and shower transfer systems, and repairs related to any of those items. See item 2 for instructions.

- a. Select the type of provider (62 Medical Supplier)
- b. Enter the Medicaid Billing Number

If the billing number is unknown call the Medicaid hotline number at 1-800-662-9651. If the billing number is still unknown contact the State Plan Medicaid liaison, Anita Hall at 801-538-6483.

- i. If the item is covered, purchase it with the Medicaid card.
- ii. If the item is not covered, print the screen. This is your Medicaid denial.

Example: If you are purchasing an adult car seat, the "Medicaid Billing number" or HCPC is T5001. If you plug in provider type 62, then enter code T5001 with the current date on the Lookup Tool, it will bring up the State plan requirements for car seats. If you look at the requirements for T5001 that appear, review the heading "Allowed Age Range", it will state: "EPSDT Only". This means it is a possibility that State plan may cover a car seat for individuals age 20 and under. For individuals aged 21 and older, however, a car seat is not a Medicaid benefit (i.e., adult car seat). If a DSPD waiver participant needs an adult car seat and is 21 years of age or older, a screenshot of the T5001 code on the Lookup Tool will be sufficient to show State Plan Medicaid will not cover it. Conversely, if a car seat for an individual aged 20 or under is required, this screenshot will not be sufficient, and either a written denial or documentation of a conversation with Medicaid shall be required before DSPD pays.

2. To look up stair lifts, permanent ceiling track lifts, vehicle lifts, ramps, permanent bath and shower transfer systems, and repairs related to any of those items, go to the Medicaid

<u>Provider Manuals for Medical Supplies and Durable Medical Equipment</u> on the Utah Department of Health Medicaid webpage.

- a. Select the "Manuals" link, a new window will appear
- b. Select the "Utah Medicaid Provider Manual" link on the Utah Medicaid Official Publications page
- c. Select the "Medicaid Provider Manuals", a list of sections will appear
- d. Select the "Medical Supplies and Durable Medical Equipment" link
- e. Select "MedSupplyDME.pdf" link, open the manual and go to section 9 Non- Covered Services which reads as follows:

Some specific non-covered DME are listed below. The list is not all inclusive.

- Equipment permanently attached or mounted to a building or a vehicle, including ramps, lifts, and bathroom rails.
- f. Print a screenshot of this portion and ensure you are using the most updated manual at the time you pull the screen shot. **This is your Medicaid denial.**

Please be aware that any temporary or portable type lifts, like Hoyer lifts, can be covered by Medicaid in certain instances, thus a screenshot from the manual will not be sufficient. For purchases of temporary or portable lifts, a written denial or documentation of a conversation with Medicaid is required.

3. Documentation of a written or conversation denial must include: the date, who you spoke with, and that they confirm an item is not covered by Medicaid. **This is your Medicaid Denial.**